
(NOTE: A COPY OF THIS INSTRUMENT IS TO BE FILED ON EACH PARCEL NUMBER LISTED AS HAVING A CONNECTION TO THIS SYSTEM)

ID NUMBER OF WATER SYSTEM: _____

PARCEL NUMBER OF WELL: _____

Any person interested in obtaining further information regarding this water system may contact the Seattle-King County Department of Public Health.

Name _____
Address _____
City _____ State _____ Zip _____

(Owner/developer)

_____ to me known to be the
Individual(s) _____ described herein who executed the foregoing instrument, and
acknowledge that they signed and sealed the same as his/her/their free and voluntary act and deed, for the uses
and purposes therein mentioned.

(Notary Public in and for the State of Washington,
Residing at _____)